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JC872 U.S. PTO
09/782503
02/13/01

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

PCL-02-002U

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	14 minus 20 =	* 0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	8 minus 3 =	* 5
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEES	RATE	FEES
	\$ 355		\$ _____
x \$ 18 =	0	OR x \$ _____ =	
x 40 =	200	OR x _____ =	
+ _____ =		OR + _____ =	
TOTAL	555	OR TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus	** =
Independent (37 CFR 1.16(b))	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
x \$ _____ =		OR x \$ _____ =	
x _____ =		OR x _____ =	
+ _____ =		OR + _____ =	
TOTAL		OR TOTAL	ADDITIONAL FEE

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus	** =
Independent (37 CFR 1.16(b))	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
x \$ _____ =		OR x \$ _____ =	
x _____ =		OR x _____ =	
+ _____ =		OR + _____ =	
TOTAL		OR TOTAL	ADDITIONAL FEE

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus	** =
Independent (37 CFR 1.16(b))	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
x \$ _____ =		OR x \$ _____ =	
x _____ =		OR x _____ =	
+ _____ =		OR + _____ =	
TOTAL		OR TOTAL	ADDITIONAL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.
 Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark
 Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for
 Patents, Washington, DC 20231.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09782503

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	14 minus 20= *	<i>0</i>
INDEPENDENT CLAIMS	8 minus 3= *	<i>5</i>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	FEES
BASIC FEE	355.00
X\$ 9=	<i>0</i>
X40=	<i>200.00</i>
+135=	
TOTAL	<i>553</i>

RATE	FEES
BASIC FEE	710.00
X\$18=	
X80=	
+270=	
TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Minus	=	
Total	* <i>20</i>	** <i>20</i>	=
Independent	* <i>9</i>	*** <i>8</i>	= <i>1</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	<i>0</i>
X40=	<i>40</i>
+135=	<i>0</i>
TOTAL ADDIT. FEE	<i>40</i>

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

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(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Minus	=	
Total	*	**	=
Independent	*	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Minus	=	
Total	*	**	=
Independent	*	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.